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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | 't 1: | Identify Yourself | | | |
|-----|-----------------------|--|--|---|---|
| | • | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | | |
| | your pictu exar | e the name that is on government-issued irre identification (for nple, your driver's ise or passport). | Shirley First name A Middle name | | First name Middle name |
| | iden | g your picture tification to your ting with the trustee. | Oliver Last name and Suffix (Sr., Jr., II, III) | 1 | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | | |
| | | ide your married or den names. | | | |
| 3. | youi num Indi | the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number | xxx-xx-4117 | | |

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Case number (if known)

Debtor 1 Shirley A Oliver

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ☐ I have not used any business name or EINs. DBA By Faith Home Daycare Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 8034 S. Hermitage | If Debtor 2 lives at a different address: |
| | | Chicago, IL 60620 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Cook | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known) Debtor 1 Shirley A Oliver

| Par | Tell the Court About | rour B | ankruptcy Ca | se | | |
|-----|---|------------|---------------|---|---|---|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. |
| | choosing to file under | ■ C | hapter 7 | | | |
| | | □с | hapter 11 | | | |
| | | □с | hapter 12 | | | |
| | | □с | hapter 13 | | | |
| | | | | | | |
| 8. | How you will pay the fee | | about how yo | u may pay. Typio attorney is subm | cally, if you are paying the fee yo | k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with |
| | | | | | allments. If you choose this option (Official Form 103A). | on, sign and attach the Application for Individuals to Pay |
| | | | I request tha | t my fee be wai | ved (You may request this option | n only if you are filing for Chapter 7. By law, a judge may, |
| | | | | | | ur income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out |
| | | | | | | sial Form 103B) and file it with your petition. |
| | | | | | | |
| 9. | Have you filed for | ■ No |). | | | |
| | bankruptcy within the last 8 years? | □ Ye | es. | | | |
| | • | | District | | When | Case number |
| | | | District | | When | Case number |
| | | | District | | When | Case number |
| | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No |) | | | |
| | filed by a spouse who is | □ Ye | es. | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | | | | | | |
| 11. | Do you rent your residence? | ■ No | O. Go to I | ne 12. | | |
| | | □ Ye | es. Has yo | ur landlord obtai | ned an eviction judgment agains | t you and do you want to stay in your residence? |
| | | | | No. Go to line 1 | 2. | |
| | | | | Yes. Fill out <i>Initi</i> bankruptcy petit | | Judgment Against You (Form 101A) and file it with this |

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Document Page 4 of 55 Case number (if known) Debtor 1 Shirley A Oliver Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Shirley A Oliver

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Shirley A Oliver Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do vou □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shirley A Oliver Signature of Debtor 2 Shirley A Oliver Signature of Debtor 1 Executed on November 16, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Shirley A Oliver Page 7 of 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Alexan | der Tynkov | Date | November 16, 2016 |
|-------------------|------------------------|---------------|----------------------|
| Signature of | f Attorney for Debtor | | MM / DD / YYYY |
| Alexander | r Tynkov | | |
| Printed name | | | |
| Zalutsky 8 | & Pinski, Ltd. | | |
| Firm name | | | |
| 111 W. Wa | ashington | | |
| Suite 1550 |) | | |
| Chicago, I | IL 60602 | | |
| | City, State & ZIP Code | | |
| Contact phone | 312-782-9792 | Email address | admin@ZAPLawFirm.com |
| 6273193 | | | |
| Bar number & S | State | | |

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| | | DUCUIII | eni. Paue o ui oo | |
|------------------------|--------------------------|-------------------|-------------------|----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Shirley A Oliver | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is a |
| (| | | | amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|---|--------------|-------------------------|
| | | Your as | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,400.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 5,400.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 28,783.76 |
| | Your total liabilities | \$ | 28,783.76 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,600.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,505.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal, | family, or |

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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Debtor 1 Shirley A Oliver

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ | 2,859.94 |
|----|--|----|----------|
| | | 1 | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|--|------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 16-36513 Doc 1 Filed 11/16/16 Entered 11/16/16 12:53:01 Desc Main Page 10 of 55 Document Fill in this information to identify your case and this filing: Debtor 1 Shirley A Oliver Middle Name Last Name First Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: Solara Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 1990 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$800.00 \$800.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$800.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | | age 11 of 55 Case number (if known) | Desc Main |
|---------------|---|--|----------------------------------|
| ■ Yes | s. Describe | | |
| | 5 rooms of furniture and household goods | s | \$1,200.00 |
| □ No | onics ples: Televisions and radios; audio, video, stereo, and digital equipmen including cell phones, cameras, media players, games s. Describe 1 computer, 4 TVs, stereo set, basic other | | collections; electronic devices |
| Examp ■ No | etibles of value ples: Antiques and figurines; paintings, prints, or other artwork; books, p other collections, memorabilia, collectibles s. Describe | | n, or baseball card collections; |
| Examp | ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby equipment; bicyc musical instruments s. Describe | les, pool tables, golf clubs, skis; canoes | and kayaks; carpentry tools; |
| ■ No | rms mples: Pistols, rifles, shotguns, ammunition, and related equipment s. Describe | | |
| □ No | nes mples: Everyday clothes, furs, leather coats, designer wear, shoes, acce s. Describe | essories | |
| | used personal clothing | | \$1,000.00 |
| ■ No □ Yes | elry mples: Everyday jewelry, costume jewelry, engagement rings, wedding is. Describe farm animals | rings, heirloom jewelry, watches, gems, | gold, silver |
| Exam ■ No | mples: Dogs, cats, birds, horses s. Describe | | |
| ■ No | other personal and household items you did not already list, includes. Give specific information | ding any health aids you did not list | |
| | d the dollar value of all of your entries from Part 3, including any er Part 3. Write that number here | | \$3,000.00 |
| | Describe Your Financial Assets | | |
| Do you o | own or have any legal or equitable interest in any of the following? | | Current value of the |

portion you own?
Do not deduct secured claims or exemptions.

Case 16-36513 Doc 1 Filed 11/16/16 Entered 11/16/16 12:53:01 Desc Main Document Page 12 of 55 Case number (if known) Debtor 1 Shirley A Oliver 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking and savings Marguette Bank \$100.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: By Faith Home Daycare - Sole Propriotorship 100% \$0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

Case 16-36513 Doc 1 Filed 11/16/16 Entered 11/16/16 12:53:01 Desc Main Document Page 13 of 55 Case number (if known) Debtor 1 Shirley A Oliver 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ No ■ Yes. Give specific information about them... Daycare license \$0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... **Expected tax refund 2016** \$1.500.00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$1,600.00

■ No

☐ Yes. Give specific information..

| | | Case 16-36513 | Doc 1 | Filed 11/16/16 Document | Entered 1 Page 14 of | 1/16/16 12:53:01 55 | Desc Main | |
|----------------|---------------|--|----------------|-----------------------------|-------------------------|---------------------------|-------------------|------------|
| Debto | or 1 | Shirley A Oliver | | 2004 | . ago = . o. | Case number (if known) | | |
| Part 5 | Desc | cribe Any Business-Related | Property You | Own or Have an Interest | In. List any real esta | ate in Part 1. | | |
| 37. D o | you ov | vn or have any legal or equi | table interest | in any business-related p | roperty? | | | |
| I | No. Go t | o Part 6. | | | | | | |
| | Yes. Go | to line 38. | | | | | | |
| | | | | | | | | |
| Part 6 | | cribe Any Farm- and Comme u own or have an interest in fa | | | n or Have an Interes | st In. | | |
| 46. D | o you d | own or have any legal or | equitable in | nterest in any farm- or o | commercial fishir | ng-related property? | | |
| | No. G | o to Part 7. | | | | | | |
| | ☐ Yes. | Go to line 47. | | | | | | |
| | | | | | | | | |
| Part 7 | ' : | Describe All Property You | Own or Have a | an Interest in That You Did | Not List Above | | | |
| E | Example No | have other property of all es: Season tickets, country tive specific information | y club membe | | | | | |
| 54. | Add th | e dollar value of all of yo | our entries fr | om Part 7. Write that n | umber here | | | \$0.00 |
| Part 8 | 3: L | ist the Totals of Each Part | of this Form | | | | | |
| 55. | Part 1: | Total real estate, line 2 | | | | | | \$0.00 |
| 56. | Part 2: | Total vehicles, line 5 | | | \$800.00 | | | |
| 57. | Part 3: | Total personal and hous | sehold items | s, line 15 | \$3,000.00 | | | |
| 58. | Part 4: | Total financial assets, li | ne 36 | | \$1,600.00 | | | |
| 59. | Part 5: | Total business-related p | property, line | e 45 | \$0.00 | | | |
| 60. | Part 6: | Total farm- and fishing- | related prop | erty, line 52 | \$0.00 | | | |
| 61. | Part 7: | Total other property not | listed, line | 54 + | \$0.00 | | | |
| 62. | Total p | ersonal property. Add lir | nes 56 throug | h 61 | \$5,400.00 | Copy personal property to | otal | \$5,400.00 |
| 63. | Total o | f all property on Schedu | ile A/B. Add | line 55 + line 62 | | | \$5, _′ | 400.00 |

Official Form 106A/B Schedule A/B: Property page 5

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Page 15 of 55 Document Fill in this information to identify your case: Debtor 1 **Shirley A Oliver** Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
|--|--------------------------------------|--|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | | | |
| 1990 Nissan Solara Line from Schedule A/B: 3.1 | \$800.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Ente from Gonedate 7VB. Gri | | | 100% of fair market value, up to any applicable statutory limit | | |
| 5 rooms of furniture and household goods | \$1,200.00 | | \$1,200.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 1 computer, 4 TVs, stereo set, basic other electronics | \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| used personal clothing | \$1,000.00 | | 100% | 735 ILCS 5/12-1001(a) | |
| Zino nom Gonedale / v.Z. 1111 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Checking and savings: Marquette Bank | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 16-36513 Doc 1 Filed 11/16/16 Entered 11/16/16 12:53:01 Desc Main Document Page 16 of 55 Debtor 1 Shirley A Oliver Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Federal: Expected tax refund 2016 735 ILCS 5/12-1001(b) \$1,500.00 \$1,500.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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| Fill in this infor | mation to identify your | case: | | |
|------------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1 | Shirley A Oliver | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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| Ü | 400 10 00010 2 | Document | Page 18 of 55 | 12.00.01 | o man |
|---|---|--|---|---|--|
| Fill in this info | rmation to identify your | | 1 000 100 | | |
| Debtor 1 | Shirley A Oliver | | | | |
| Dobto. 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT OF | FILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | _ c | heck if this is an |
| | | | | aı | mended filing |
| Official For | m 106E/E | | | | |
| | | ho Have Unsecure | nd Claims | | 12/15 |
| | | | PRITY claims and Part 2 for creditors | W MONDRIODITY I. | |
| Schedule G: Exect Schedule D: Cred eft. Attach the Co name and case no | cutory Contracts and Unexplitors Who Have Claims Sectiontinuation Page to this pagumber (if known). | ired Leases (Official Form 1060 ured by Property. If more space e. If you have no information to | so list executory contracts on Scheo 3). Do not include any creditors with e is needed, copy the Part you need, o report in a Part, do not file that Par | partially secured claims fill it out, number the ent | that are listed in ries in the boxes on the |
| | All of Your PRIORITY Un | | | | |
| _ ` | itors have priority unsecure | d claims against you? | | | |
| No. Go to | Part 2. | | | | |
| ☐ Yes. | | | | | |
| Part 2: List | All of Your NONPRIORIT | Y Unsecured Claims | | | |
| 3. Do any credi | tors have nonpriority unsec | ured claims against you? | | | |
| ☐ No. You h | ave nothing to report in this pa | art. Submit this form to the court | with your other schedules. | | |
| Yes. | | | | | |
| unsecured cla | aim, list the creditor separately | for each claim. For each claim li | of the creditor who holds each claim isted, identify what type of claim it is. Do you have more than three nonpriority ur | o not list claims already inc | luded in Part 1. If more |
| | | | | | Total claim |
| 4.1 Alliant | Credit Union | Last 4 digits of | account number XXXX | | \$0.00 |
| 11545 | ity Creditor's Name W. Touhy | When was the d | debt incurred? | _ | |
| | hare, IL 60666 Street City State Zlp Code | As of the date y | ou file, the claim is: Check all that ap | vlac | |
| | curred the debt? Check one. | , | -, | , | |
| ■ Debt | or 1 only | ☐ Contingent | | | |
| ☐ Debte | or 2 only | ☐ Unliquidated | | | |
| ☐ Debte | or 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At lea | ast one of the debtors and and | other Type of NONPR | RIORITY unsecured claim: | | |
| ☐ Chec | ck if this claim is for a comr | nunity | S | | |
| debt Is the cl | aim subject to offset? | Obligations a report as priority | arising out of a separation agreement o | r divorce that you did not | |
| ■ No | | ☐ Debts to pen | sion or profit-sharing plans, and other | similar debts | |
| ☐ Yes | | Other. Specif | fy collection | | |

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Debtor 1 Shirley A Oliver Case number (if know) 4.2 American General Life Insurance Last 4 digits of account number \$0.00 Nonpriority Creditor's Name PO BOX 305700 When was the debt incurred? Nashville, TN 37230 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes 4.3 **ASSET ACCEPTANCE** \$0.00 Last 4 digits of account number 9700 Nonpriority Creditor's Name C/O MORTELL KEVIN W When was the debt incurred? **1821 WALDEN OFFICE S** Schaumburg, IL 60173 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Judgement Other. Specify 4.4 \$338.00 AT&T Mobility Last 4 digits of account number Nonpriority Creditor's Name 5020 Ash Grove Rd When was the debt incurred? Springfield, IL 62711-6329 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes

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Debtor 1 Shirley A Oliver Case number (if know) 4.5 City of Chicago Last 4 digits of account number \$2.065.00 Nonpriority Creditor's Name **Department of Revenue** When was the debt incurred? 121 N. LaSalle St. Rm. 107A Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 **Comcast Chicago** Last 4 digits of account number 5579 \$395.00 Nonpriority Creditor's Name When was the debt incurred? Credit Management LP 4200 International Parkway Carrollton, TX 75007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection Other. Specify 4.7 **Fingerhut** Last 4 digits of account number 7932 \$0.00 Nonpriority Creditor's Name Opened 9/01/05 Last Active 6250 Ridgewood Rd When was the debt incurred? 2/10/08 St Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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| Debtor | 1 Shirley A Oliver | Case number (if know) | |
|----------|--|--|------------|
| 4.8 | Firestone | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name Credit First NA P.O. Box 81344 | When was the debt incurred? | |
| | Cleveland, OH 44188-0344 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Поль | |
| | | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other Specify Collection | |
| 4.9 | GE Money Bank Nonpriority Creditor's Name | Last 4 digits of account number 1718 | \$1,985.00 |
| | PO Box 960061 Orlando, FL 32896-0061 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | |
| 4.1 0 | GMAC Nonpriority Creditor's Name | Last 4 digits of account number | \$5,051.93 |
| | PO BOX 380902 Minneapolis, MN 55438 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | Other Specify Collection | |

| Shirley A Oliver | Document Page 22 of 55 Case number (if know) | |
|---|--|-----|
| HSBC Bank | Last 4 digits of account number | |
| Nonpriority Creditor's Name PO BOX 98706 Las Vegas, NV 89193 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Collection | |
| IC Systems, Inc | Last 4 digits of account number 9001 | |
| Nonpriority Creditor's Name 444 Highway 96 East St Paul, MN 55127 | When was the debt incurred? Opened 03/14 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Collection Attorney Att Midwest | |
| Mountain Summit Financial | Last 4 digits of account number | \$: |
| Nonpriority Creditor's Name 635 East Hwy 20, F | When was the debt incurred? | |
| Upper Lake, CA 95485 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |

Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Loan

☐ Student loans

debt

Type of NONPRIORITY unsecured claim:

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill \square$ At least one of the debtors and another

 $\hfill\square$ Check if this claim is for a community

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Document Page 23 of 55 Debtor 1 Shirley A Oliver Case number (if know) 4.1 **OverInd Bond** 9805 \$8,698.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 3/16/13 Last Active 4701 W. Fullerton Ave. When was the debt incurred? 11/25/15 Chicago, IL 60639 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile ☐ Yes 4.1 **Peoples Gas** XXXX \$114.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Bankruptcy Department When was the debt incurred? One Prudential Plaza 16th FL Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.1 \$341.00 **Pinnacle Credit Services** Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 640 When was the debt incurred? Hopkins, MN 55343 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

■ Other. Specify Collection

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

| | Case 16-36513 | Doc 1 | Filed 11/16/16 Document | Entered 11/16/16 12:53:01 Page 24 of 55 Case number (if know) | Desc Main |
|-----------------------|--|-------|----------------------------|---|------------|
| 4.1 Santa | ander Consumer US | A | Last 4 digits of acco | unt number | \$5,000.00 |
| Nonpri PO B | ority Creditor's Name lox 560284 ls, TX 75356-0284 | | When was the debt i | ncurred? | |
| | er Street City State Zlp Code |) | As of the date you fil | e, the claim is: Check all that apply | |
| Who ii | ncurred the debt? Check or | ne. | | | |
| ■ De | otor 1 only | | ☐ Contingent | | |
| ☐ De | otor 2 only | | ☐ Unliquidated | | |

| | Who incurred the debt? Check one. | As of the date you file, the claim is. Check all that apply | | | | | | |
|----------|--|---|---|--|--|--|--|--|
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | | | |
| | ☐ At least one of the debtors and another | | | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | ☐ Yes | ■ Other. Specify co-signed debt | | | | | | |
| 4.1 | Sears | Last 4 digits of account number 8429 | \$790.29 | | | | | |
| <u> </u> | Nonpriority Creditor's Name | | <u> </u> | | | | | |
| | P.O. Box 183081 | When was the debt incurred? | | | | | | |
| | Columbus, OH 43218-3081 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | , | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | □ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | Yes | ■ Other. Specify Charge-no hard goods | | | | | | |
| 4.1 | Springleaf Financial | Last 4 digits of account number 5754 | \$1,481.00 | | | | | |
| 9 | Nonpriority Creditor's Name | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | |
| | 856 W. 35th St. | When was the debt incurred? | | | | | | |
| | Chicago, IL 60609 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | , | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | ☐ Yes | ■ Other. Specify Collection | | | | | | |

| Debt | Case 16-36513 DOC 1 or 1 Shirley A Oliver | Document Page 2 | ed 11/16/16 12:53:U1 | /iain |
|----------|--|--|---|------------|
| 4.2 | Synchrony Bank/ JC Penneys | Last 4 digits of account number | 8334 | \$0.00 |
| | Nonpriority Creditor's Name | | | |
| | Po Box 965064 Orlando, FL 32896 | When was the debt incurred? | Opened 01/01 Last Active 2/21/01 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.2 | Verizon Wireless | Last 4 digits of account number | 8222 | \$461.77 |
| <u>'</u> | Nonpriority Creditor's Name 777 Big Timber Road Elgin, IL 60123-1488 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other. Specify Service | | |
| 4.2 2 | Wells Fargo / Balaban Furniture | Last 4 digits of account number | | \$1,520.77 |
| | Nonpriority Creditor's Name Asset Acceptance , LLC PO BOX 2036 | When was the debt incurred? | | |
| | Warren, MI 48090 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Collection

debt

■ No

☐ Yes

☐ Student loans

Other. Specify

report as priority claims

 \square Check if this claim is for a community

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 Shirley A Oliver | | Case number (if know) |
|--|--|--|
| Name and Address afni 1310 MLK Drive P.O. Box 3427 Bloomington, IL 61702-3427 | On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Allied Interstate 3000 Corporate Exchange Dr 5th floo Columbus, OH 43231 | On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Capital Management Services, Inc. 726 Exchange Street Suite 700 Buffalo, NY 14210 | On which entry in Part 1 or Part 2 did y Line 4.9 of (<i>Check one</i>): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | | |
| Name and Address CBCS P.O. Box 69 Columbus, OH 43216 | On which entry in Part 1 or Part 2 did y Line 4.21 of (Check one): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Fulton Fredman & Gullace, LLP PO BOX 2123 | On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Warren, MI 48090 | Last 4 digits of account number | |
| Name and Address HSBC Bank PO BOX 98706 Las Vegas, NV 89193 | On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address LVNV Funding P.O. Box 10497 Greenville, SC 29603 | On which entry in Part 1 or Part 2 did y Line 4.22 of (<i>Check one</i>): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address LVNV Funding LLC* PO Box 10587 Greenville, SC 29603-0587 | On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Mercantile 6341 Inducon Drive East Sanborn, NY 14132 | On which entry in Part 1 or Part 2 did y Line 4.19 of (Check one): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Portfolio Recovery Assoc P.O. Box 41067 Norfolk, VA 23541 | On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Portfolio Recovery Assoc P.O. Box 41067 Norfolk, VA 23541 | On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one): Last 4 digits of account number | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |

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Debtor 1 Shirley A Oliver

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 28,783.76 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 28,783.76 |

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| | | Docume | IIL I duc ZU UI JJ | |
|---------------------|--------------------------|-------------------|--------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Shirley A Oliver | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | ☐ Check if this is an |
| , | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | - | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | Docume | ent Page 29 (| of 55 | |
|-----------------|--|---------------------------------|---------------------------|---|---|
| Fill in this | s information to identify you | ur case: | | | |
| Debtor 1 | Shirloy A Olivo | - | | | |
| Debioi i | Shirley A Oliver | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fil | ling) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the | : NORTHERN DISTRICT | OF ILLINOIS | | |
| Officed Sta | ates bankruptcy court for the | . NORTHERN DISTRICT | OI ILLINOIS | | |
| Case num | nber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| ~ · · | 15 40011 | | | | |
| Officia | al Form 106H | | | | |
| Sched | dule H: Your Co | debtors | | | 12/15 |
| | | | | | |
| ill it out, a | | ne boxes on the left. Attach | the Additional Page | tion. If more space is neede to this page. On the top of a | d, copy the Additional Page, ny Additional Pages, write |
| 1. Do | you have any codebtors? (| If you are filing a joint case, | do not list either spouse | e as a codebtor. | |
| ■ No | | | | | |
| | | | | | |
| □ 16 | :5 | | | | |
| | thin the last 8 years, have y na, California, Idaho, Louisiar | | | ry? (Community property state ington, and Wisconsin.) | es and territories include |
| ■ No | o. Go to line 3. | | | | |
| | o. Go to line 3. es. Did your spouse, former sp | ouse or legal equivalent live | with you at the time? | | |
| □ 16 | s. Dia your spouse, former sp | ouse, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| | | | | | you. List the person shown |
| | | | | | editor on Schedule D (Official dule E/F, or Schedule G to fill |
| | Column 2. | iai i oi iii 100£/1 /, oi oonea | uic o (omoiai i omi i | ood). Ode Contedute B, Conte | |
| | O. J. Wassa and Man | | | O. / O. The anadition | to sub-our constitution debt |
| | Column 1: Your codebtor Name, Number, Street, City, State and | I ZIP Code | | Check all schedules that | to whom you owe the debt |
| | ,,, | | | Officer all serieudies tha | гарріў. |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Ni mahari Chrash | | | | |
| | Number Street City | State | ZIP Code | | |
| | Oily | oldio | 211 0000 | | |
| | | | | <u>_</u> | |
| 3.2 | N | | | D Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | <u> </u> | |
| | City | State | ZIP Code | | |

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| Eill | in this information to identify y | OUR COOC. | | | | 1 | | | |
|--------------------|---|---|--|---------------------|----------------|---|------------------------------------|--|-----------------|
| | | A Oliver | | | | | | | |
| | btor 2 | | | | | | | | |
| Uni | ited States Bankruptcy Court fo | or the: NORTHERN DISTRI | CT OF ILLINOIS | | | | | | |
| (If kr | se number nown) fficial Form 106I | | - | | | ☐ A sup 13 in | mended filing | ing postpetition following date: | |
| S | chedule I: Your I | ncome | | | | IVIIVI / | <i>DD</i> / 1111 | | 12/1 |
| sup spo atta | as complete and accurate as plying correct information. I use. If you are separated and ch a separate sheet to this formation. Describe Employment | you are married and not fili d your spouse is not filing w orm. On the top of any addit | ng jointly, and your ith you, do not inclu | spouse ude infor | is liv mati | ring with you on about yo I case numb | u, include info ur spouse. If n | rmation about nore space is Answer every | your needed, |
| | information. | t. | _ | | | | Employed | -ming spouse | |
| | If you have more than one jo attach a separate page with information about additional employers. | Employment status | ■ Employed □ Not employed | | | | ☐ Not employed | | |
| | | Occupation | Child Care Pro | | | | | | |
| | Include part-time, seasonal, self-employed work. | Employer's name | By Faith Home | Daycar | е | | | | |
| | Occupation may include stude or homemaker, if it applies. | dent Employer's address | 8034 Hermitage Chicago, IL 606 | | | | | | |
| | | How long employed t | there? 7 years | s | | | | | |
| Par | rt 2: Give Details Abou | t Monthly Income | | | | | | | |
| spou | mate monthly income as of use unless you are separated. | • | , | · | | | · | • | J |
| | ou or your non-filing spouse ha e space, attach a separate she | | ombine the information | on for all e | emplo | oyers for that | t person on the | lines below. If | you need |
| | | | | | | For Debtor | | ebtor 2 or iling spouse | |
| 2. | | salary, and commissions (buthly, calculate what the month | | 2. | \$ | 4,00 | 0.00 \$ | N/A | |
| 3. | Estimate and list monthly | overtime pay. | | 3. | +\$ | | 0.00 +\$ | N/A | |
| 4. | Calculate gross Income. | Add line 2 + line 3. | | 4. | \$ | 4,000.0 | 00 \$ | N/A | |

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| Deb | otor 1 | Shirley A Oliver | - | | Case | e number (<i>if known</i>) | | | | | |
|-----|-----------------------|--|--------------|-----------|-----------|------------------------------|----------|------|---------------|---------------|--------------------|
| | | | | | Fo | r Debtor 1 | | | ebtor | 2 or pouse | |
| | Cop | y line 4 here | 4. | | \$_ | 4,000.00 |) | \$ | 9 | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | | |
| ٠. | 5a. | Tax, Medicare, and Social Security deductions | 5: | a. | \$ | 0.00 | , | \$ | | N/A | 1 |
| | 5b. | Mandatory contributions for retirement plans | | b. | \$- | 0.00 | _ | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | | c. | \$- | 0.00 | _ | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | | d. | \$ | 0.00 | _ | \$ | | N/A | |
| | 5e. | Insurance | | e. | \$ | 0.00 | _ | \$ | | N/A | |
| | 5f. | Domestic support obligations | 51 | f. | \$ | 0.00 | _ | \$ | | N/A | |
| | 5g. | Union dues | 5 | g. | \$ | 0.00 |) | \$ | | N/A | - |
| | 5h. | Other deductions. Specify: | _ 51 | h.+ | \$ | 0.00 | _ | + \$ | | N/A | <u> </u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 0.00 |) | \$ | | N/A | <u> </u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 4,000.00 |) | \$ | | N/A | <u> </u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | _ | | _ | • | | | |
| | O.L. | monthly net income. | | a. | \$_ | 0.00 | _ | \$ | | N/A | |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | b. | \$_ | 0.00 | _ | \$ | | N/A | <u>1</u> |
| | | settlement, and property settlement. | 80 | c. | \$_ | 0.00 |) | \$ | | N/A | _ |
| | 8d. | Unemployment compensation | | d. | \$_ | 0.00 | _ | \$ | | N/A | |
| | 8e. | Social Security | 80 | e. | \$_ | 0.00 | _ | \$ | | N/A | <u>\</u> |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | - 81 - 89 | | \$_ \$ | 0.00 0.00 | _ | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: Meal program for daycare | | y. h.+ | | 600.00 | | + \$ | | N/A | |
| | 011. | mear program for daycare | _ " | ۰۲ | Ψ_ | 000.00 | <u>-</u> | · — | | 14/7 | <u>`</u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | . | \$ | 600.00 |) | \$ | | N/ | ' A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 4,600.00 + | | | N/A | = \$ | 4,600.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ľ | | 1,000.00 | _ | | 1471 | | 1,000.00 |
| 11. | Incli othe Do i | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | dep | | | | | | hedule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | 12. | \$ | 4,600.00 |
| 12 | Do. | you expect an increase or decrease within the year often you file this form | 2 | | | | | | · | Comb | ined nly income |
| 13. | ■ | you expect an increase or decrease within the year after you file this form No. Yes Explain: | - | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill.in | n this informa | ation to identify yo | our case: | | | | | |
|----------------|-------------------------------|---------------------------------------|-----------------------------|--|-----------------------|------------------|------------------------------------|---|
| Debte | | Shirley A Ol | | | | | k if this is: An amended filing | |
| Debte | or 2 use, if filing) | | | | | | A supplement show | ving postpetition chapter the following date: |
| ` ' | | . 0 . (. 1 | . NODTI | IEDN DICTRICT OF ILLIN | 010 | | | |
| Unite | ed States Banki | ruptcy Court for the | : NORTE | IERN DISTRICT OF ILLIN | OIS | I | MM / DD / YYYY | |
| Case (If kn | e number own) | | | | | | | |
| | | orm 106J | | | | | | |
| | | J: Your | | | Cilia a da mada an la | -4 | D | 12/15 |
| info | rmation. If m | | eded, atta | . If two married people ar ch another sheet to this n. | | | | |
| Part | | ribe Your House | hold | | | | | |
| 1. | Is this a join No. Go to | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | □N | lo | • | | | | | |
| | □Y | es. Debtor 2 mus | st file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of Debt | or 2. | |
| 2. | Do you hav | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | names. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| 3. | Do your exp | penses include | | No | | | | □ res |
| | | f people other t d your depende | han $_{oldsymbol{\square}}$ | Yes | | | | |
| Part | 2: Estim | nate Your Ongoi | na Monthi | v Expenses | | | | |
| Esti | mate your ex | xpenses as of you | our bankr | uptcy filing date unless y y is filed. If this is a supp | | | | |
| Inclu | ude expense | es paid for with | non-cash | government assistance i | f you know | | | |
| | value of suc icial Form 10 | | d have inc | cluded it on Schedule I: \ | our Income | | Your exp | enses |
| 4. | | or home owners | | ses for your residence. I or lot. | nclude first mortgage | e 4. \$ | | 1,300.00 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | | 0.00 |
| | • | erty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | e maintenance, re eowner's associa | | upkeep expenses | | 4c. \$ 4d. \$ | | 100.00 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 4u. \$ 5. \$ | | 0.00 |

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| btor 1 Shirley A Oliver | Case num | ber (if known) | |
|--|----------|----------------|----------|
| Utilities: | | | |
| 6a. Electricity, heat, natural gas | 6a. | \$ | 300.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 120.00 |
| 6d. Other. Specify: | 6d. | · - | 0.00 |
| Food and housekeeping supplies | | \$ | 400.00 |
| Childcare and children's education costs | 8. | \$ | 0.00 |
| Clothing, laundry, and dry cleaning | 9. | * | 100.00 |
|). Personal care products and services | 10. | · | 80.00 |
| . Medical and dental expenses | 11. | · | 60.00 |
| 2. Transportation. Include gas, maintenance, bus or train fare. | | Ψ | 00.00 |
| Do not include car payments. | 12. | \$ | 100.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insurance. | | · | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insurance | 15a. | \$ | 0.00 |
| 15b. Health insurance | 15b. | \$ | 0.00 |
| 15c. Vehicle insurance | 15c. | \$ | 65.00 |
| 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Specify: | 16. | \$ | 0.00 |
| 7. Installment or lease payments: | | | |
| 17a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. Other. Specify: | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | 17d. | \$ | 0.00 |
| 3. Your payments of alimony, maintenance, and support that you did not report as | | | 0.00 |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). | 18. | · | 0.00 |
| Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| Specify: | 19. | _ | |
| Other real property expenses not included in lines 4 or 5 of this form or on Sche | | | |
| 20a. Mortgages on other property | 20a. | · | 0.00 |
| 20b. Real estate taxes | 20b. | · - | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | * | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . Other: Specify: Son's income from Business | 21. | +\$ | 240.00 |
| Daughter | | +\$ | 160.00 |
| Business supplies | | +\$ | 100.00 |
| Cleaning supplies for business | | +\$ | 125.00 |
| Food for children | | +\$ | 850.00 |
| Field trip costs | | +\$ | 125.00 |
| Computer supplies | | +\$ | 100.00 |
| Books Materials | | +\$ | 25.00 |
| General office expenses | | +\$ | 50.00 |
| Business Postage/mail | | +\$ | 30.00 |
| | | . • | 30.00 |
| 2. Calculate your monthly expenses | | | |
| 22a. Add lines 4 through 21. | | \$ | 4,505.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,505.00 |
| , , , | | | -, |
| Calculate your monthly net income. | | • | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 4,600.00 |
| 23b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 4,505.00 |
| | | | |
| | | 1 | |
| Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$ | 95.00 |

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| Debtor ' | Shirley A | A Oliver | Case number (if known) | | | | | | |
|-----------|--|---------------|------------------------|--------|--|--|--|--|--|
| For mo | 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. | | | | | | | | |
| | Yes. | Explain here: | | \neg | | | | | |

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| Fill in this info | rmation to identify your | case: | | | |
|---------------------|--|--------------------------|---------------------------|--------------------------|---|
| Debtor 1 | Shirley A Oliver | | | | |
| DCDIOI 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT | F OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | m 106Dec | | | | |
| Declara | tion About a | ın individual | Debtor's So | chedules | 12/15 |
| Si | gn Below | | | | |
| Did you p | ay or agree to pay some | one who is NOT an atto | rney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | nalty of perjury, I declare are true and correct. | that I have read the sum | nmary and schedules file | ed with this declaration | n and |
| | nirley A Oliver | | x | | |
| | ey A Oliver | | Signature o | f Debtor 2 | |
| Signat | ture of Debtor 1 | | | | |
| Date | November 16, 2016 | | Date | | |

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| Filli | in this inform | nation to identify you | r case: | | | | | | | |
|---------|---|--|--|------------------------------------|-------------------------------------|------------------------------------|--|--|--|--|
| Deb | tor 1 | Shirley A Oliver | | | | | | | | |
| Dah | to = 0 | First Name | Middle Name | Last Name | | | | | | |
| | tor 2 use if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Unit | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | | | | | |
| 0 | | | | | | | | | | |
| (if kno | e number own) | | | | | Check if this is an | | | | |
| | | | | | | amended filing | | | | |
| ~ | | | | | | | | | | |
| | icial Fo | | | | | | | | | |
| Sta | tement | of Financial | Affairs for Individ | luals Filing for B | ankruptcy | 4/10 | | | | |
| | | | ble. If two married people a attach a separate sheet to | | | | | | | |
| | | i). Answer every que | | | y additional pages, write yo | ai name and case | | | | |
| Part | 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | | | | | |
| 1. | What is your | current marital statu | ıs? | | | | | | | |
| | _ | | | | | | | | | |
| | ■ Married■ Not mar | riad | | | | | | | | |
| | | | | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| | □ No | □ No | | | | | | | | |
| | Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | I. | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ldress: | Dates Debtor 2 lived there | | | | |
| | 6020 S. Pa Chicago, II | | From-To: 2000-8/2015 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: | | | | |
| | s and territorion | es include Arizona, Ca | ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev nedule H: Your Codebtors (Of | /ada, New Mexico, Puerto R | | | | | | |
| Part | 2 Explain | n the Sources of You | r Income | | | | | | | |
| | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | Ill businesses, including part- | -time activities. | endar years? | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income | Gross income | Sources of income | Gross income | | | | |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) | | | | |
| | | of current year until d for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$42,340.00 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | Operating a business | | ☐ Operating a business | | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Case number (if known) Debtor 1 Shirley A Oliver

| | | | | Debtor 1 | | | | Debtor 2 | | |
|---------------------|----------|-------------------------------------|---|---|---|--|--|--|-----------------------------------|---|
| | | | | Sources of inco | oply. (I | Gross income pefore deductions a exclusions) | nd | Sources of inco Check all that ap | | Gross income (before deductions and exclusions) |
| For last (Januar | | lar year: December | 31, 2015) | ☐ Wages, combonuses, tips | missions, | \$39,167. | 00 | ☐ Wages, common bonuses, tips | nissions, | |
| | | | | Operating a l | ousiness | | | ☐ Operating a b | usiness | |
| | | ar year be December | | ☐ Wages, combonuses, tips | missions, | \$17,943. | 00 | ☐ Wages, comm bonuses, tips | nissions, | |
| | | | | Operating a | ousiness | | | ☐ Operating a b | usiness | |
| | each so | • | he gross inco | • | • | eceived together, lis | | | | |
| | | | | Debtor 1 | | | | Debtor 2 | | |
| | | | | Sources of inco Describe below. | e (I | iross income from ach source pefore deductions an xclusions) | | Sources of inco Describe below. | me | Gross income (before deductions and exclusions) |
| Part 3: | List | Certain Pa | yments You | Made Before Yo | u Filed for Ban | kruptcy | | | | |
| 6. Are □ | No. | Neither Deindividual puring the No. | ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below 6 paid that cr not include | n personal, family, ore you filed for ba '. each creditor to wheditor. Do not inclupayments to an ar | arily consumer or household punkruptcy, did you nom you paid a fude payments fottorney for this b | r debts. Consumer irpose." u pay any creditor a cotal of \$6,425* or mor domestic support | total on ton | of \$6,425* or more one or more payn tions, such as chil | e? nents and tl d support a | 1(8) as "incurred by ar he total amount you and alimony. Also, do |
| • | | Debtor 1 c | or Debtor 2 c | or both have prim | arily consume | | | | • | |
| | | ■ No. □ Yes | include pay | each creditor to wh | ic support obliga | otal of \$600 or more tions, such as child | | | | t creditor. Do not include payments to ar |
| Cre | editor's | Name and | l Address | Date | s of payment | Total amour | | Amount you still owe | Was this բ | payment for |

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Case number (if known) Debtor 1 Shirley A Oliver

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | |
|-----|--|------------------------------|----------------------|----------------------|----------------------------|------------------------------|--|
| | ■ No □ Yes. List all payments to an insider. | | | | | | |
| | ☐ Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an | |
| | ■ No□ Yes. List all payments to an insider | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment ditor's name | |
| Pai | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | ne case | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. | | | | | | |
| | Yes. Fill in the information below. | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property | |
| | | Explain what happened | | | | 1 17 7 | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taker | action was | Amount | |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes | | | | | | |
| Pai | t 5: List Certain Gifts and Contributions | | | | | | |
| 13. | Within 2 years before you filed for bankrup No | otcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? | |
| | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |

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| Deb | Shirley A Oliver | | | Case number (| (if known) | |
|-----|---|--------------------------|--|-----------------|-----------------------------------|---------------------------|
| 14. | Within 2 years before you filed for ban No | | | ons with a tota | I value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or | r contributi | on. | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | | Describe what you contributed | | Dates you contributed | Value |
| Par | tt 6: List Certain Losses | | | | | |
| 15. | Within 1 year before you filed for bank or gambling? | ruptcy or | since you filed for bankruptcy, did | you lose anyt | hing because of the | ft, fire, other disaster |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | | | | | | |
| | Describe the property you lost and how the loss occurred | Include | be any insurance coverage for the the amount that insurance has paid. ce claims on line 33 of Schedule A/E | List pending | Date of your loss | Value of property lost |
| Par | rt 7: List Certain Payments or Transfe | ers | | | | |
| | consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Zalutsky & Pinski, Ltd. 111 W. Washington Suite 1550 Chicago, IL 60602 | n preparers | | · | Date payment or transfer was made | Amount of payment |
| 17. | promised to help you deal with your or Do not include any payment or transfer the | editors or | r to make payments to your credito | | r transfer any prope | erty to anyone who |
| | ☐ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | | Description and value of any pro transferred | perty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for ban transferred in the ordinary course of y. Include both outright transfers and transfer include gifts and transfers that you have a No | our busine ers made a | ess or financial affairs? as security (such as the granting of a | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | any property or received or debts | Date transfer was made |

paid in exchange

Person's relationship to you

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Debtor 1 **Shirley A Oliver**

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | which you are a | |
|-----|---|----------|---|--------------------|-----------------------|--|-----------------|---|
| | Name of trust | | Description and | value of the pro | perty tran | sferred | | Date Transfer was made |
| Par | 8: List of Certain Financial Accounts, I | nstrum | nents, Safe Deposi | it Boxes, and S | torage Uni | its | | |
| 20. | Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass | or oth | ner financial accou | ınts; certificate: | s of depos | • | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | et 4 digits of count number | Type of acco | unt or | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within cash, or other valuables? | year I | before you filed fo | r bankruptcy, a | ny safe de | posit box or other depo | sito | ry for securities, |
| i | ■ No | | | | | | | |
| | Yes. Fill in the details. | | M/L L L L L | 1- 110 | D '' | the contents | | D |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | | Do you still have it? |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? |
| Par | 9: Identify Property You Hold or Control | ol for S | Someone Else | | | | | |
| 23. | Do you hold or control any property that s for someone. | omeor | ne else owns? Incl | ude any propei | rty you boı | rrowed from, are storing | for | , or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | | Where is the property? (Number, Street, City, State and ZIP Code) | | Describe | Describe the property | | Value |
| Par | 10: Give Details About Environmental Ir | forma | tion | | | | | |
| For | he purpose of Part 10, the following defini | tions a | apply: | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or | | | | | | | |

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Shirley A Oliver

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | | |
|--|--|--|--|---|--|--|--|--|
| Nar Addo 25. Have Nar Addo 26. Have Cas Cas Part 11: 27. With | _ 140 | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice Date of notice and orders. Status of the case y business? | | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ironmental law? Include settlements ar | nd orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | | | | | |
| Par | 11: Give Details About Your Business or Con | nnections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have ar | ny of the following connections to any | business? | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| Cas Cas | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | nip (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing execut | tive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or | r equity securities of a corporation | | | | | | |
| | ■ No. None of the above applies. Go to Part | 12. | | | | | | |
| | Yes. Check all that apply above and fill in t | the details below for each business | s. | | | | | |
| | Business Name De Address | escribe the nature of the business | Employer Identification number Do not include Social Security n | umber or ITIN | | | | |
| | | ame of accountant or bookkeeper | Dates business existed | amber of fritt. | | | | |
| | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | did you give a financial statement | to anyone about your business? Includ | de all financial | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | | | | | |
| | | | | | | | | |

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| Part 1 | 2: Sign Below | | |
|-------------------|-------------------------|---|--|
| are tru with a | e and correct. I unders | nis Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the ans stand that making a false statement, concealing property, or obtaining money or property by fraud in conr esult in fines up to \$250,000, or imprisonment for up to 20 years, or both. and 3571. | |
| /s/ Sł | nirley A Oliver | | |
| Shirle | ey A Oliver | Signature of Debtor 2 | |
| Signa | ture of Debtor 1 | | |
| Date | November 16, 2010 | Date | |
| Did yo | u attach additional pag | es to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |
| No | | | |
| □ Yes | 3 | | |
| Did yo | u pay or agree to pay | comeone who is not an attorney to help you fill out bankruptcy forms? | |
| No | | | |
| Π Yes | Name of Person | Attach the Bankruntcy Petition Preparer's Notice Declaration, and Signature (Official Form 119) | |

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| Fill in this infor | mation to identify your ca | ise: | | |
|---|--|--|--|--|
| Debtor 1 | Shirley A Oliver | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | ankruptcy Court for the: | NORTHERN DIST | TRICT OF ILLINOIS | |
| Officed States Da | ankruptcy Court for the. | NORTHERN DIO | THIS OF ILLINOIS | |
| Case number (if known) | | | | |
| (II KIIOWII) | | | | ☐ Check if this is an amended filing |
| If you are an ind creditors hav you have leas You must file th which on the If two married p sign an Be as complete write y | nt of Intentior lividual filing under chapt we claims secured by your sed personal property an is form with the court wite ever is earlier, unless the form eople are filing together ind date the form. | er 7, you must fil r property, or d the lease has n hin 30 days after court extends th n a joint case, bo e. If more space is per (if known). | | e set for the meeting of creditors, o the creditors and lessors you list ct information. Both debtors must |
| | tors that you listed in Par | | : Creditors Who Have Claims Secured by Prop | perty (Official Form 106D), fill in the |
| | elow. reditor and the property tha | at is collateral | What do you intend to do with the property secures a debt? | that Did you claim the property as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | _ |
| Description of | • | | ☐ Retain the property and enter into a | ☐ Yes |
| Description of property | l | | Reaffirmation Agreement. | |
| securing debt | : | | ☐ Retain the property and [explain]: | |
| Creditor's | | | Course don the property. | Пм |
| name: | | | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| | | | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | : | | | |

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

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| Debtor 1 | Shirley A Oliver | Case number (if known) | |
|---------------------------|---|---|-------------------------------------|
| name: Descri proper | ption of ty | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| Part 2: | ng debt: List Your Unexpired Personal Property L nexpired personal property lease that you | eases I listed in Schedule G: Executory Contracts and Unexpire | d Leases (Official Form 106G), fill |
| in the info | ormation below. Do not list real estate leas | ses. Unexpired leases are leases that are still in effect; the ease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | lease period has not yet ended. |
| Describe | your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Lessor's | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's | | | □ No |
| Property: | on of leased | | ☐ Yes |
| Part 3: | Sign Below | | |
| | nalty of perjury, I declare that I have indicated that is subject to an unexpired lease. | ated my intention about any property of my estate that see | cures a debt and any personal |
| | Shirley A Oliver | X Signature of Debtor 2 | |
| | rley A Oliver nature of Debtor 1 | Signature of Debtor 2 | |
| Date | November 16, 2016 | Date | |

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-36513 Doc 1 Filed 11/16/16 Entered 11/16/16 12:53:01 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Shirley A Oliver | | Case No | | | | |
|----------------|---|--|--------------------|--------------------------------------|----|--|--|
| | | Debtor(s) | Chapter | 7 | | | |
| | DISCLOSURE OF COMP | ENSATION OF ATTOR | RNEY FOR I | DEBTOR(S) | | | |
| (| compensation paid to me within one year before the f | uant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that pensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to endered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | |
| | For legal services, I have agreed to accept | | \$ | 217.05 | | | |
| | Prior to the filing of this statement I have receive | ed | \$ | 0.00 | | | |
| | Balance Due | | \$ | 217.05 | | | |
| 2. | \$ 335.00 of the filing fee has been paid. | | | | | | |
| 3. | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 5. | ■ I have not agreed to share the above-disclosed co | empensation with any other person | unless they are me | embers and associates of my law firm | m. | | |
| | ☐ I have agreed to share the above-disclosed compo | | | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to | o render legal service for all aspect | s of the bankruptc | y case, including: | | | |
| 1 | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. | | | | | | |
| | Outside counsel may be employed ur | nder firm supervision, and pai | d by our firm. | | | | |
| 7. | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any | | | ary proceeding. | | | |
| | | CERTIFICATION | | | | | |
| | I certify that the foregoing is a complete statement of bankruptcy proceeding. | any agreement or arrangement for | payment to me fo | r representation of the debtor(s) in | | | |
| N | lovember 16, 2016 | /s/ Alexander Tyn | kov | | | | |
| \overline{D} | Date | Alexander Tynko | v 6273193 | | | | |
| | | Signature of Attorne Zalutsky & Pinsk i | | | | | |
| | | 111 W. Washingto | on | | | | |
| | | Suite 1550 Chicago, IL 60602 | 2 | | | | |
| | | 312-782-9792 Fa | x: 312-782-0483 | (| | | |
| | | admin@ZAPLawl Name of law firm | irm.com | | | | |

| PRE-PETITION CHAPTER 7 RETAINER AGREEMENT | | | | | |
|---|--|--|--|--|--|
| | to retain the law film of Zalutsky & Pinski, Ltd., for the limited purpose of providing legal service related to an including; providing an evaluation of the undersigned's financial situation and an explanation of available options, including Chapter 13. After which Zalutsky & Pinski, Ltd., agreed to prepare and file Debtor(s)' petition and/or schedules with the Clerk of the Bankruptcy Court. In addition to the legal services provided, Zalutsky & Pinski, Ltd., agrees to obtain a credit report on behalf of the Debtor(s) as well as assist in the procurement of mandatory credit counseling. Zalutsky & Pinski, Ltd.'s representation is completed and any and all agreements, including but not limited to this one are terminated upon the filing of Debtor(s)' Bankruptcy petition and/or schedules. Debtor(s) agrees to pay a retainer in the amount of \$ | | | | |
| | petition retainer agreement. | | | | |

Date

X Joint Debtor

Date

United States Bankruptcy Court Northern District of Illinois

| In re | Shirley A Oliver | | Case No. | |
|-------|---|---|-----------|--|
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR M | IATRIX | |
| | Number of Creditors: 33 | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | |
| Date: | November 16, 2016 | /s/ Shirley A Oliver Shirley A Oliver Signature of Debtor | | |

afni 1310 MLK Drive P.O. Box 3427 Bloomington, IL 61702-3427

Alliant Credit Union 11545 W. Touhy Amf Ohare, IL 60666

Allied Interstate 3000 Corporate Exchange Dr 5th floo Columbus, OH 43231

American General Life Insurance PO BOX 305700 Nashville, TN 37230

ASSET ACCEPTANCE C/O MORTELL KEVIN W 1821 WALDEN OFFICE S Schaumburg, IL 60173

AT&T Mobility 5020 Ash Grove Rd Springfield, IL 62711-6329

Capital Management Services, Inc. 726 Exchange Street Suite 700 Buffalo, NY 14210

CBCS P.O. Box 69 Columbus, OH 43216

City of Chicago Department of Revenue 121 N. LaSalle St. Rm. 107A Chicago, IL 60602

Comcast Chicago Credit Management LP 4200 International Parkway Carrollton, TX 75007 Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

Firestone Credit First NA P.O. Box 81344 Cleveland, OH 44188-0344

Fulton Fredman & Gullace, LLP PO BOX 2123 Warren, MI 48090

GE Money Bank PO Box 960061 Orlando, FL 32896-0061

GMAC PO BOX 380902 Minneapolis, MN 55438

HSBC Bank PO BOX 98706 Las Vegas, NV 89193

HSBC Bank PO BOX 98706 Las Vegas, NV 89193

IC Systems, Inc 444 Highway 96 East St Paul, MN 55127

LVNV Funding P.O. Box 10497 Greenville, SC 29603

LVNV Funding LLC*
PO Box 10587
Greenville, SC 29603-0587

Mercantile 6341 Inducon Drive East Sanborn, NY 14132 Mountain Summit Financial 635 East Hwy 20, F Upper Lake, CA 95485

Overlnd Bond 4701 W. Fullerton Ave. Chicago, IL 60639

Peoples Gas c/o Bankruptcy Department One Prudential Plaza 16th FL Chicago, IL 60601

Pinnacle Credit Services P.O. Box 640 Hopkins, MN 55343

Portfolio Recovery Assoc P.O. Box 41067 Norfolk, VA 23541

Portfolio Recovery Assoc P.O. Box 41067 Norfolk, VA 23541

Santander Consumer USA PO Box 560284 Dallas, TX 75356-0284

Sears P.O. Box 183081 Columbus, OH 43218-3081

Springleaf Financial 856 W. 35th St. Chicago, IL 60609

Synchrony Bank/ JC Penneys Po Box 965064 Orlando, FL 32896

Verizon Wireless 777 Big Timber Road Elgin, IL 60123-1488

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Wells Fargo / Balaban Furniture Asset Acceptance , LLC PO BOX 2036 Warren, MI 48090